AnnualReport 2002/2003

Brandon Regional Health Authority Inc.

VISION.....

A model region, responsive to the community through teamwork and a focus on "health".

MISSION.....

Promotion of healthy choices and delivery of health services across the lifespan in a variety of settings; in partnership with the residents of the Brandon and neighbouring Regions.

VALUES.....

We Believe In.....

***Integrity** and are committed to being open and honest with our partners in the workplace and the people that we serve.*

***Continuous Improvement** as a means of achieving quality, efficiency, excellence and promoting creativity in all that we do.*

***Respect and Dignity** in life and in death and will promote client choice, and be sensitive to the needs of individuals, families and co-workers.*

***Teamwork** and shared decision-making as being integral to reaching our mission, vision and goals.*

***Accessibility** to services in a seamless delivery system and a single point of entry in multiple sites.*

Brandon Regional Health Authority:
150A 7th Street • Brandon, MB • R7A 7M2
Ph: (204) 571-8400 Fax: (204) 726-8505
www.brandonrha.mb.ca

The Brandon Regional Health Authority offers a wide range of health services and programs to the citizens of Brandon, the rural municipalities of Cornwallis, Elton, Whitehead and neighbouring regions.

The Brandon Regional Health Centre is recognized as a regional referral centre and serves a total population of approximately 180,000 people.

We have the honour to present the annual report for the Brandon Regional Health Authority, for the fiscal year ended March 31, 2003.

This annual report was prepared under the Board's direction, in accordance with The Regional Heath Authorities Act and directions provided by the Minister of Health. All material economic and fiscal implications known as of March 31, 2003 have been considered in preparing the annual report.

Respectfully Submitted on Behalf of the Brandon Regional Health Authority.

Larry Hogue
Chairman of the Board

Brandon RHA Board of Directors

2002/2003

Back Row L - R:
Mr. Garry Bell, Ms. Janet Johnson, Mr. Bill Bryant, Mr. Errol Black, Mr. Terry Drebit, Chair Mr. Larry Hogue, Ms. Janet Johnston.
Front Row L - R:
Mr. Wayne Langlois, Mrs. Lorna Cowan, Ms. Karen Peto, Ms. Allison McNeill-Hordern.

A complete set of financial statements, auditors reports and the statement of public sector compensation disclosure can be obtained from the Brandon RHA administration office or by calling 571-8400.

It has been a privilege to function in the position of Chief Executive Officer of the Brandon Regional Health Authority since December of 2002, continuing as a member of a team that is innovative and dedicated to continuous quality improvement.

Notwithstanding the challenges, there were many opportunities and the Annual Report highlights the achievements resulting from the collective efforts of personnel throughout the organization, volunteers, and our partners in the community.

Although a deficit was projected, we realized a small surplus at year-end, largely due to fiscally responsible strategies, staffing vacancies, and additional support from Manitoba Health. We will however, have to monitor expenditures carefully in the ensuing year, in order to maintain a positive financial position.

On behalf of the entire staff, I thank the members of the Board for their strong support and commitment to the community. I am confident that the Vision and Corporate Priorities are attainable, if we maintain a collaborative approach and build on past successes.

Carmel Olson
Chief Executive Officer

Executive Management Committee

Back Row L - R:
Ms. Heather Kirkham, VP of Long-Term Care & Community Services;
Ms. Janet Wilcox-McKay, Comptroller/Corporate Liaison;
Dr. Charles Wilson, VP Medical Services;
Ms. Bev Cumming, Executive Director Planning & Evaluation.

Front Row L - R:
Mr. Brian Schoonbaert, VP Finance & Information Services;
Ms. Kathy McPhail, VP Acute Care Services;
Ms. Carmel Olson, CEO;
Mr. Gary McIntosh, VP Support Services.

Highlights of strategies not included in Health Plans

- Enhanced Newborn Hearing Screening Program by acquisition of new equipment donated by Lions Club International ($60,000) and $9,000 additional funds shared between Brandon and Assiniboine RHAs.
- LEAPS program provided speech/language services to preschool children at Little Teaching Lodge, Preschool Enrichment and Southwest Day Care. Funding provided by Delta Kappa Gamma donation.
- The Elks and Royal Purple Fund for Children contributed $8,700 to the Preschool Aural Rehab program to purchase of supplies/equipment to enhance programming.
- Installation of new ICU bedside & central monitoring system - funding provided by Manitoba Health.
- Commenced planning for an Aboriginal Elder Program.
- Free income tax service for low-income individuals in partnership with Revenue Canada has had a 44% increase in returns.
- Implemented Pre-Renal program and Peritoneal Dialysis Nurse positions through re-allocations.
- Re-allocated funds from vacant position to Chaplaincy to increase coverage from 1.5 EFT to 2.0 EFT.
- Completion of wound prevalence study in Home Care & Long Term Care and provided training to staff re: Best practice wound management protocols.
- Five staff attained certification as Lactation Consultants and a Lactation Consultant referral system and tracking mechanism was developed.
- Hosted Child Abuse workshop with funding from the Royal Bank.
- Implemented an Aboriginal Recruitment & Retention strategy.
- Established a full-time Risk Manager with funds redirected from deleted management position.

The 5 Corporate Priorities

1 Human, financial and capital resources that are appropriate and sustainable

Action:	Support voluntary unpaid Leave of Absences (LOAs).
Status:	Minimal participation.
Action:	Assess all vacant positions.
Status:	One Support Services management position to be deleted upon retirement of incumbent in June 2003.
Action:	Continue including all dept. heads in zero-based budgeting process.
Status:	VPs, Coordinators, Program Managers, & Supervisors involved in detailed planning, as well as ongoing monitoring.
Action:	Complete implementation of "Sexual Assault Program".
Status:	Will require ongoing training and orientation of volunteers.
Action:	Consolidate services for long-term ventilation patients.
Status:	Target completion date 2nd quarter of 2003.
Action:	Finalize implementation of partnership for itinerant Audiology services with Parkland and Norman Regions.
Status:	Completed
Action:	Complete the following capital projects and secure operating funding:
Status:	* Clinical Services Redevelopment Project, In progress; Diagnostic Services of Manitoba (DSM) In progress; Bed tower at BRHC, Delayed; Diagnostic Imaging (DI) redevelopment, Delayed; MRI development, In progress; laundry relocation, Delayed; incinerator redevelopment, Delayed. * Proposal for a comprehensive plan with a phased approach in developmental stages for: bed tower, laundry, incinerator, DI, conversion of decanted space related to CSRP, and other capital projects in health plans.

Action:	Develop plan for inclusion of "Hospitalists" in physician complement.
Status:	Will now be considered by Physician Recruitment and Retention Committee and EMC.
Action:	Collaborate with Manitoba Health & the Winnipeg RHA to effect a Memorandum of Understanding re: centralized management of Hillcrest Place & Central Park Lodges.
Status:	Completed
Action:	Initiate development of a functional program and design of a Radiation Therapy Unit in collaboration with Cancer Care Manitoba.
Status:	Initial discussions and planning are underway.
Action:	Develop Short Stay Unit through redirection of money saved from practice changes.
Status:	Plan to redirect funds from surgical unit in 03/04 or 04/05.
Action:	Refine the "equipment acquisition process" & secure funding to support programs/services, including building maintenance & replacement.
Status:	* Continues to be a gap between funding and equipment needs. * Acquisition process improved and utilized region-wide.
Action:	Secure appropriate operating funds.
Status:	Baseline remains inadequate.

Highlights

Not included in Health Plan

Surgical waiting list in March 2002 was 1400 and in March 2003 was 1045.

Successful recruitment efforts for pediatric, psychiatry and emergency room physicians.

Existing space was renovated at Rideau Park to provide quiet space for families of Palliative Care patients.

Some of the major equipment purchases included: Physiological monitoring system in ICU, Emergency, Operating Room and Recovery; anaesthetic delivery machines in the Operating Room; monitors/defibrillators for ICU and Emergency; electro-surgical units for the Operating Room and Day Surgery; patient lift system for Fairview Personal Care Home and Assiniboine Centre (BRHC).

Equipment Maintenance Insurance Program was established and implemented by Bio-Medical Services. The Brandon RHA realized a savings of $67,000 over the original equipment manufacturer's service contracts.

A new door control and monitoring system was introduced (card access) to incorporate a higher level of security.

In November an Aboriginal Coordinator was hired under the Manitoba Education, Training and Youth Program and has since developed and implemented an Aboriginal focused employment plan for the Region.

A clinical practice arrangement has been implemented with the University of Regina Dietician program.

Telehealth has facilitated linkage with a pediatric cardiologist in Winnipeg. It enables ultrasound, EKG and heart sounds to be transmitted in real time via the link to facilitate diagnosis.

An additional firewall, for the computer network, was installed to protect against both internal and external attacks on the Brandon RHA data.

2 Health programs and services that are people-centered, evidence-based and needs-driven

Action: Maintain a corporate strategic planning process that facilitates participation throughout the organization. Status: * Strategic planning, CQI, and accreditation processes integrated.	Action: Conduct operational reviews where indicated. Status: * Reviews completed in Central Information Services, Rehabilitation and Extended Care. * Recommendations have been considered and implemented or phased plans established as appropriate.
Action: Implement the Performance Measurement Project (PMP). Status: * Monthly reporting at team meetings and to Executive Management Committee (EMC). * Quarterly reports to the Board of Directors. * Scorecard implementation is outstanding.	Action: Conduct comprehensive Community Health Assessment (CHA) q 5 years with specific target groups and services. Status: * Ongoing approach adopted, as well as provincial collaboration. * Target groups addressed in 02/03 include Acquired Brain injury (ABI) clients and persons at risk for homelessness.
Action: Develop formal evaluation tools that are program & service specific. Status: * Generic tool developed & is currently under review.	Action: Divert hospital respite beds to Rideau Park Personal Care Home. Status: Completed through funding from Manitoba Health for building renovations
Action: Conduct comparisons with national indicators and best practices. Status: * Hired Clinical Practice Guideline Facilitator through redirected funds. * Implemented Patient Care Standards Committee.	

Highlights
Not included in Health Plan

Personal Health Information Act education is provided at each Regional Staff Orientation session.

Implemented an Automated Medication Distribution System and Clinical Pharmacists.

Pet Therapy program established on a weekly basis for rehabilitation and waiting placement clients in the Assiniboine Centre through St. John's Therapy Dogs.

A Bereavement Telephone Support Program for Palliative Care families commenced October 02.

A Sexual Assault Response Team was established.

Implementation of the Palliative Care Drug Program Dec 02.

3 Integrated system with services along a seamless health care continuum

Action: Avoid duplication of service through multi-sectoral partnerships. Status: * RHA has established numerous partnerships * Central intake process in progress for Speech Language Therapy/Occupational Therapy/Physiotherapy * Multi-agency Preschool Wellness Day. * Early Years Team established. * Safe Communities Coalition.	Action: Seek opportunities to improve integration across programs & services i.e. promote the concept of "no walls" and virtual sites. Status: * Interdisciplinary planning for utilization; Primary Health Care Centre (PHC) initiative; outreach clinics at hospital. * Additional Home Care Case Coordinator introduced in hospital setting through redirected funds. * Mental health programs integrated, with exception of Crisis Services. * Planning with Addictions Foundation of Manitoba (AFM) to address needs of clients with co-occurring mental illness & substance abuse.
Action: Region-wide integrated Electronic Health Record (EHR) to coordinate service provision amongst multiple providers. In progress Status: * Lab (LIS)/Radiology (RIS) Information Systems/Picture Archiving System (PACS) implemented. * Electronic Health Record in progress and aligned with Clinical Services Redevelopment Project.	Action: Promote the notion that "health promotion and education re disease prevention is everybody's job". Status: * Stakeholders' meetings/planning commenced re: cardiac care, chronic diseases, respiratory, and palliative care.
Action: Determine the feasibility of a Primary Health Care initiative & submit proposal. Status: Proposal submitted and approved, planning underway Completed	

Highlights
Not included in Health Plan

An Executive Management and Medical Advisory forum was started to review issues affecting the Region such as Physician Performance Review.

Computer software applications are now used in acute care areas to order lab/diagnostic imaging tests and patient diets from Nutrition Services.

Through the Manitoba Smart Network (MSN) infrastructure, Neepawa is operating their Admission Discharge Transfer processes off Brandon's computer systems. Neepawa is able to connect back to Brandon to transmit digital x-ray images.

A multi-agency service delivery model has been evolving and ensures optimum services for high need individuals.

Nutrition Services completed the Diet Compendium, which can be viewed on the local public folder network. This invaluable educational tool will soon be accessible to the general public by means of the Brandon RHA website.

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4 An organization that attracts and retains employees who feel valued and supported

Action

Ensure the development and implementation of a comprehensive Human Resources (HR) plan, including succession and mentoring plans, and recruitment and retention strategies.

Status

* Partnership with Education & Training established to support continuing education & laddering
* Forgivable loans available.
* Preceptors/internships for: dieticians, pharmacists, occupational therapists, physiotherapists, social work and nurses.
* Vacant RN positions declined from 50 to 20 (full-time equivalent).
* Overtime rate slightly decreased.
* Sick leave rate less than industry average
* Comprehensive HR plan in progress.

Action

Implement Employee Wellness Program.

Status

* Smoking cessation program in development stage.
* Massage therapy available at most sites.
* Employee Wellness Team in process of being established.

Action Status

Determine feasibility of a Child Day Care at BRHC site.
Delayed

Action

Ensure effective communication strategies throughout the Region.

Status

Communication Survey completed.

* Combination of "yes" and "sometimes" is 94%.
* Plans to alter structure of general staff meetings, as current forum was mechanism with lowest score in survey.
* Established "Regional Leadership Team" forum to expand decision- making.
* Established forum to meet with municipal councils.
* Providing written CEO report to Board.
* Established "physician recruitment and retention" committee with two major clinics.
* Established Medical Advisory Committee/Executive Management Committee forum.
* Meet with staff and partners as requested or indicated.

Action

Develop and implement initiatives that contribute to the creation of a healthy workforce and workplace.

Status

* Partnership with WCB re; return to work programs.
* Staff satisfaction survey shows 73% in 2002 compared to 69% in 2000.

Highlights

Not included in Health Plan

In-house Computer training sessions have been made available to all staff. A total of 1059 staff completed courses in: Getting Started Series, Outlook, Word, Power Point, and Windows Explorer.

Several recruitment strategies were implemented to combat a serious Pharmacist shortage.

Partnerships continue with educational institutions for student practicum in most programs/departments in Brandon Regional Health Authority.

An on-call procedure was established for Bio-Medical Services to provide 24x7 support to critical medical equipment and systems in the Brandon Regional Health Authority.

A Forgivable Loan Policy was introduced and eleven applications were approved for a total of $86,370.00 to support education for professionals (primarily nursing and laboratory) in exchange for a "return to work" contract.

A number of wellness initiatives for staff have taken place such as on-site massage therapy, Critical Incident Stress Debriefing for staff, Post exposure protocol, Blood Pressure clinics and an exercise program at the Brandon Regional Health Centre (BRHC).

BRHC volunteers were recognized as a group for their contributions through the Mayor of Brandon's Volunteer Service Award in April 03.

The Medical Unit developed a Mentorship Program Feb 03.

Introduction of an Employee Assistance Program.

The introduction of a Card Access Server along with a new Photo ID system has created a safer work environment; all staff in the RHA has been issued new photo name tags.

5 Improved health status of the community through strategies that focus on wellness and population health

Action:	Develop & implement a tobacco reduction strategy with emphasis on children & pregnant women.
Status:	* Two staff trained at Mayo Clinic re: "addictions model". * Two physicians to train in October 2003. * Plan to implement staff pilot in November 2003 and expand to community according to evaluation results. * RHA participated in lobby to support City of Brandon smoking by-law.
Action:	Support healthy child development in children of teenage parents with prenatal care, parenting skills training and day care in high school.
Status:	* Proposal for high school based day care is in development stage. * Special Delivery Club provides prenatal education specific to this target group. * Parenting skills training through Baby First; at Elspeth Reid Family Resource Centre; in partnership with Manitoba Metis Federation (MMF) at the Friendship Centre.
Action:	Participate in Chronic Disease Prevention Project in partnership with Alliance for Chronic Disease.
Status:	* Proposal submitted to Manitoba Health. * Brandon & Assiniboine RHAs currently discussing chronic disease strategy.
Action:	Implement revised Regional Diabetes Program (RDP) with emphasis on Aboriginal population.
Status:	* RDP logic model completed. * Implementation partially commenced in January 2003 i.e. Intake Worker. * Developing physical activity strategy for "Westman" area. * Improved processes for client follow-up

Action:	Develop strategies to reduce the incidence of teenage pregnancy.
Status:	* Family Planning Clinics at The Town Centre, BU, and ACC. * 1:1 counseling provided by Public Health Nurses. * Regular presentations in schools.
Action:	Develop & implement strategies to increase rate of breast cancer screening.
Status:	* Collaboration with Waves of Hope * Video production * Several speaking events well attended * Run for Cure * Breast Cancer Network web page * Established information collection in Learning Resource Centre in October 2002
Action:	Develop & implement strategies to improve the quality of life for persons with psychiatric illness: Integrated Housing Project, promote bus pass program for Income Assistance recipients, establish partnership with Society for Manitobans with Disabilities (SMD) for "Inclusive Communities" project, continue as a partner in Transitional Employment Project, Supported Living Project to promote graduation from intermediate unit & promote early intervention.
Status:	* Integrated Housing Implementation Committee established. * Funding approved for renovations to Princess Park (Manitoba Housing Authority complex). January 2004 target date for full implementation. * Grant received from Workers Compensation Board for "Maximizing Abilities in the Workplace" project with SMD. * Bus Pass Program approved for provincial IA clients as one-year pilot. * Supported Living Project established with funds redirected from Residential Care and efficiencies attained by Proctor assignments.

Provincial Priorities: In Progress

Enhanced Immunization: Immunization program as per provincial policy. Prior year successes implemented in subsequent year, Cold Chain Policy developed in partnership with Assiniboine Region and implementation has begun, entry into Manitoba Immunization Monitoring System (MIMS) improved, adverse reaction reporting.

HIV/AIDS Strategy: Harm Reduction Strategy implemented. Also expanding services to offenders in partnership with Brandon Correctional Institute and Headingley in collaboration with Manitoba Health, with plans underway as of April 2003.

Highlights

Not included in Health Plan

The Medication Follow-up Program for children in school, a joint partnership effort between the Child and Adolescent Treatment Centre and the Brandon School Division, transitioned from pilot to permanent status.

Healthy lifestyles are being actively promoted for consumers of mental health programs. This ranges from increased physical activity, to healthier food choices and portions at gatherings, to smoking reduction/cessation, to increasing the capacity for problem solving.

A proposal was accepted by MB Health for the Brandon RHA to design and implement a Primary Health Care Centre. Work on this project is proceeding with the tentative opening date January 2004.

In partnership with a variety of other organizations the Brandon RHA is actively participating in Wellness Fairs in Brandon and Assiniboine Regions. This includes the MILESTONES Preschool Wellness Day in Brandon.

Review and revision of educational materials to ensure appropriate literacy level and content has been initiated.

Implementation of Cardiac & Respiratory Clinic Nurses to provide in-house and follow-up teaching and support to prevent re-admission and empower clients to regain control of their health.

Angel Memorial Service introduced in October 02. Held twice a year to assist parents grieving the loss of a child at birth or in the neonatal period.

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Action: Determine feasibility of a Child Day Care at BRHC site.

Status: Delayed

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Action:	Develop & implement strategies to improve the quality of life for persons with psychiatric illness: Integrated Housing Project, promote bus pass program for Income Assistance recipients, establish partnership with Society for Manitobans with Disabilities (SMD) for "Inclusive Communities" project, continue as a partner in Transitional Employment Project, Supported Living Project to promote graduation from intermediate unit & promote early intervention.
Status:	* Integrated Housing Implementation Committee established. * Funding approved for renovations to Princess Park (Manitoba Housing Authority complex). January 2004 target date for full implementation. * Grant received from Workers Compensation Board for "Maximizing Abilities in the Workplace" project with SMD. * Bus Pass Program approved for provincial IA clients as one-year pilot. * Supported Living Project established with funds redirected from Residential Care and efficiencies attained by Proctor assignments.

Provincial Priorities: In Progress

Enhanced Immunization: Immunization program as per provincial policy. Prior year successes implemented in subsequent year, Cold Chain Policy developed in partnership with Assiniboine Region and implementation has begun, entry into Manitoba Immunization Monitoring System (MIMS) improved, adverse reaction reporting.

HIV/AIDS Strategy: Harm Reduction Strategy implemented. Also expanding services to offenders in partnership with Brandon Correctional Institute and Headingley in collaboration with Manitoba Health, with plans underway as of April 2003.

Highlights

Not included in Health Plan

The Medication Follow-up Program for children in school, a joint partnership effort between the Child and Adolescent Treatment Centre and the Brandon School Division, transitioned from pilot to permanent status.

Healthy lifestyles are being actively promoted for consumers of mental health programs. This ranges from increased physical activity, to healthier food choices and portions at gatherings, to smoking reduction/cessation, to increasing the capacity for problem solving.

A proposal was accepted by MB Health for the Brandon RHA to design and implement a Primary Health Care Centre. Work on this project is proceeding with the tentative opening date January 2004.

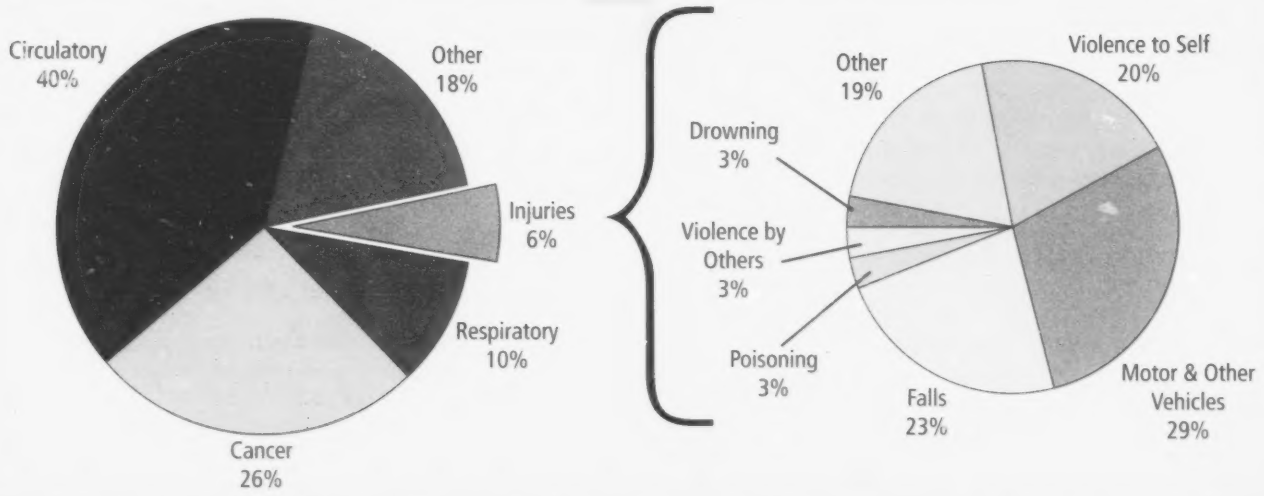
In partnership with a variety of other organizations the Brandon RHA is actively participating in Wellness Fairs in Brandon and Assiniboine Regions. This includes the MILESTONES Preschool Wellness Day in Brandon.

Review and revision of educational materials to ensure appropriate literacy level and content has been initiated.

Implementation of Cardiac & Respiratory Clinic Nurses to provide in-house and follow-up teaching and support to prevent re-admission and empower clients to regain control of their health.

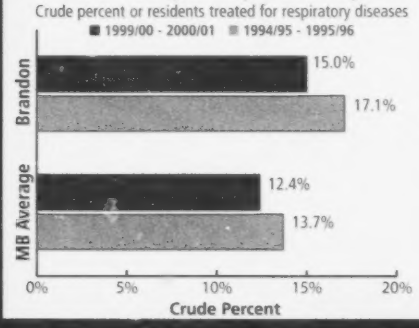
Angel Memorial Service introduced in October 02. Held twice a year to assist parents grieving the loss of a child at birth or in the neonatal period.

Top Causes of Death, Rural South & Brandon, 1995-1999



Total Respiratory Morbidity

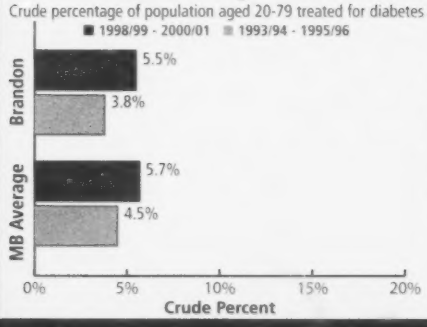
Crude percent or residents treated for respiratory diseases



This is the percentage of persons aged 25 or older who had at least one physician visit or hospitalization for a respiratory disease with a two-year period. It is expressed as a percentage because each resident is defined either as having been treated for high blood pressure, or not, in that period.

Diabetes - Age 20-79

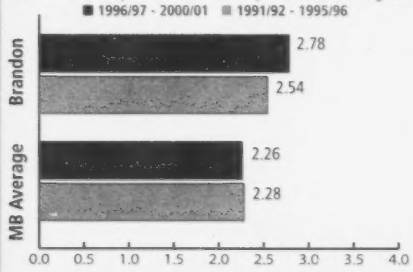
Crude percentage of population aged 20-79 treated for diabetes



This is the percentage of persons aged 20 to 79 years who, over a three year period had a diagnosis of diabetes in two or more physician visits or one hospitalization. It is expressed as a percentage because each resident is defined either as having been treated for diabetes, or not in that period.

Heart Attack Treatment Prevalence

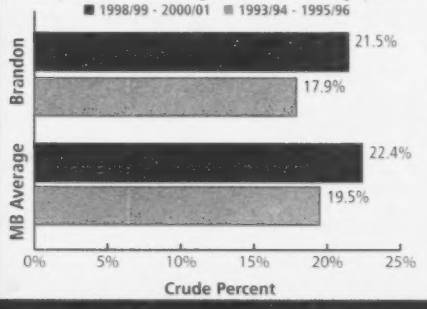
Crude rate of hospitalizations for AMI per100 residents age 20+



This is the combined number of hospitalization for acute myocardial infarction (heart attacks) experienced per thousand residents of the area aged 20 years or older, averaged over the five-year period to give an annual rate. It is not a percentage, as an individual may suffer more than one heart attack in the 5-year period. Therefore, each heart attack is counted as a separate event.

Hypertension - Age 25+

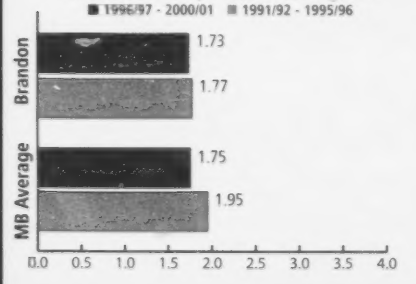
Crude percent of residents aged 25+ treated for high pressure



This is the percentage of person aged 25 or older who had at least one physician visit for hypertension in a three-year period. It is expressed as a percentage because each resident is defined either as having been treated for high blood pressure, or not, in that period.

Stroke Treatment Prevalence

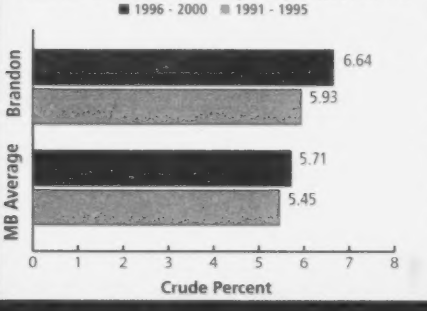
Crude rate of stroke per 1000 residents age 20+



This is the combined number of hospitalizations for strokes experienced per thousand residents of the area aged 20 or older, averaged over the five-year period to vie an annual rate. It is not a percentage, as an individual may suffer more than one stroke in the 5-year period. Therefore, each stroke is counted as a separate event.

New Cancer Cases

Crude rate of new cancer cases reported per 1,000 residents



This is the number of diagnoses of new cases of cancer per thousand residents of the area, averaged over the five year period to give an annual rate. It is not a percentage, as an individual may suffer more than one new malignancy in the five year period. Therefore, each new diagnosis is counted as a separate event.

104-00660/

Statement of Public Sector Compensation Disclosure of

BRANDON REGIONAL HEALTH AUTHORITY INC.

December 31, 2002

Deloitte & Touche LLP
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Canada

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Deloitte
& Touche

AUDITORS' REPORT

To the Board of Management
Brandon Regional Health Authority Inc.

We have audited the Brandon Regional Health Authority Inc.'s Statement of Public Sector Compensation Disclosure (as defined under The Public Sector Compensation Disclosure Act) for the year ended December 31, 2002. This financial information is the responsibility of the management of the Authority. Our responsibility is to express an opinion on this financial information based on our audit.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial information is free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial information.

In our opinion, this schedule presents fairly, in all material respects, the compensation paid greater than or equal to $50,000 for the year ended December 31, 2002 in accordance with The Public Sector Compensation Disclosure Act.

Deloitte & Touche LLP

Chartered Accountants

Winnipeg, Manitoba
April 30, 2003

Brandon Regional Health Authority
Statement of Public Sector Compensation Disclosure
For the Year Ended December 31, 2002

Compensation paid to the following employees includes all salaries and allowances, overtime payments, retirement or severance payments, lump sum payments, vacation pay-outs, taxable benefits and bursaries.

Name	Position	Compensation
Adam, C	Registered Psychiatric Nurse	$51,814
Adolph, K	Registered Nurse	$54,247
Affleck, D	Registered Nurse	$53,870
Alex, F	Registered Nurse	$54,955
Allen, K	Registered Nurse	$52,574
Anderson, B	Registered Psychiatric Nurse	$51,911
Arthurson, L	Registered Nurse	$51,073
Atkinson, S	Registered Nurse	$61,514
Aubry, B	Clinical Resource Nurse	$54,630
August, D	Senior Technologist	$50,970
Backman, E	CEO	$265,866
Babee, D	Engineer II	$53,022
Bachewich, D	Registered Nurse	$64,455
Badham, R	Registered Nurse	$53,900
Bailey, J	Registered Nurse	$54,473
Bangle, C	Registered Nurse	$52,368
Bate, M	Registered Nurse	$57,362
Bayes, M	Registered Nurse	$51,760
Beaudry, C	Manager Special Imaging	$55,100
Beaupre, K	Registered Nurse	$51,776
Bender, H	Coordinator Rehabilitation Services	$75,671
Bhagat, A	Psychiatrist	$81,973
Binda, K	Senior Analyst/Programmer	$52,389
Bird, D	Community Mental Health Worker	$52,100
Birrell, J	Nurse IV	$55,776
Blaikie, R	Registered Nurse	$50,757
Borotsik, B	Senior Speech Language Pathologist	$59,749
Bourdeau D'Hui, C	Program Educator	$53,736
Bowles, L	Senior Technologist	$64,725
Bradford, D	Registered Nurse	$61,116
Brandt, L	Psychiatrist	$85,434
Braund, S	Registered Psychiatric Nurse	$53,979
Brechka, L	Registered Nurse	$51,878
Brichon, S	Financial Services Administrator	$51,818
Brodt, R	Registered Psychiatric Nurse	$53,048
Brown, C	Equipment Coordinator	$50,487
Brown, C	Technical Administrator	$55,093
Brown, R	Registered Nurse	$53,593
Bryant, D	General Duty Technologist	$58,661
Bryant, H	Vice President Acute Care & Diagnostic Services	$91,507
Buchanan, N	Clinical Resource Nurse	$63,034
Buhler, S	Registered Psychiatric Nurse	$56,198
Burch, D	Senior Information Systems Engineer	$70,932
Butler, C	Registered Nurse	$52,496
Butler, L	General Duty Technologist	$50,799
Cadman, S	Community Nutritionist	$52,016
Cale, C	Nursing Manager	$61,184
Campbell, G	Registered Nurse	$58,137

Brandon Regional Health Authority
Statement of Public Sector Compensation Disclosure
For the Year Ended December 31, 2002

Compensation paid to the following employees includes all salaries and allowances, overtime payments, retirement or severance payments, lump sum payments, vacation pay-outs, taxable benefits and bursaries.

Name	Position	Compensation
Cardiff, C	Utilization Coordinator	$64,389
Carlson, W	Registered Nurse	$52,685
Carmichael, D	Registered Psychiatric Nurse	$50,791
Cavanagh, G	Staff Pharmacist	$71,916
Chan, S	Registered Psychiatric Nurse	$52,934
Chastko, F	Registered Psychiatric Nurse	$53,605
Cherewyk, L	Registered Nurse	$53,465
Chorney, K	Manager Food Services	$50,743
Chudley, H	Registered Nurse	$50,674
Clarke, M	Charge Technologist	$53,405
Clearwater, B	Staff Respiratory Therapist	$62,305
Cliplef, M	Medical Electronics Technologists	$57,487
Coates, J	Program Supervisor	$66,709
Coates, N	Community Mental Health Worker	$52,100
Cockerline, W	Nurse Educator	$59,104
Cooper, H	Internal Audit/Budget Administrator	$51,818
Cottom, P	Electronic Health Records Project Manager	$66,799
Cox, D	Occupational Therapist	$52,284
Crookshanks, D	Program Manager	$66,592
Crowston, S	Registered Nurse	$50,331
Cuerrier, C	Information Systems Engineer	$60,447
Culbertson, M	Registered Nurse	$53,410
Cumming, B	Coordinator Planning and Evaluation	$77,959
Curtis, T	Residential Care Manager	$61,371
Danyluk, S	General Duty Technologist	$59,705
Dauphinais, J	Program Educator	$61,676
Davies, S	Registered Nurse	$53,099
Day, M	Program Manager	$68,475
Decock, E	Clinical Resource Nurse	$55,308
Dickey, C	Registered Nurse	$50,585
Dixon, A	Registered Nurse	$54,322
Dixon, V	Registered Nurse	$54,175
Dobson, S	Staff Respiratory Therapist	$61,837
Dodds, M	Charge Technologist	$52,544
Doherty, S	Human Resource Officer	$55,192
Drake, D	Registered Psychiatric Nurse	$66,136
Dryburgh, W	Community Mental Health Worker	$52,101
Duncalfe, M	Registered Psychiatric Nurse	$52,682
Dunn, S	Nurse IV	$62,029
Duthie, D	Nurse IV	$57,402
Eberling, L	Registered Nurse	$67,056
Elliott, C	Community Mental Health Worker	$52,100
Elston, M	Registered Nurse	$54,143
Empey, T	Registered Nurse	$54,877
Eppert, H	Registered Nurse	$54,900
Ericson, B	Nurse IV	$53,216
Evason, R	Program Educator	$52,220
Falloon, S	Registered Psychiatric Nurse	$53,031

Brandon Regional Health Authority
Statement of Public Sector Compensation Disclosure
For the Year Ended December 31, 2002

Compensation paid to the following employees includes all salaries and allowances, overtime payments, retirement or severance payments, lump sum payments, vacation pay-outs, taxable benefits and bursaries.

Name	Position	Compensation
Farmer, G	Manager Dispatch	$50,149
Fay, B	Clinical Resource Nurse	$56,427
Ferozedin, K	Registered Nurse	$51,696
Fiddler, B	Registered Nurse	$54,975
Fitzsimmons, M	Program Manager	$66,671
Foley, K	Nurse Educator	$57,836
Fortune, L	Registered Nurse	$53,464
Fowell, P	Registered Nurse	$55,993
Franklin, E	Registered Nurse	$80,309
Gates, S	Registered Nurse	$59,973
Gensiorek, D	Community Mental Health Worker	$52,128
George, D	Community Mental Health Worker	$52,100
Gerelus, M	Senior Technologist	$65,278
Gfellner-Donald, C	Coordinator Community Services	$78,509
Godsalve, V	Pathologist	$101,887
Gomez, J	Pathologist	$65,132
Gothard, J	Clinical Resource Nurse	$53,686
Graetz, R	Senior Analyst/Programmer	$64,156
Gray, R	Registered Psychiatric Nurse	$53,637
Gregory, B	Registered Nurse	$54,720
Grimshaw, H	Clinical Facilitator	$66,799
Gubergrits, A	Medical Sonographer	$62,487
Hajes, A	Program Manager	$66,671
Hakman, M	Charge Technologist	$52,561
Halls, M	Registered Nurse	$53,642
Hamilton, P	Staff Pharmacist	$84,584
Hammond, K	Manager Medical Electronics	$61,064
Hammond, L	Psychologist	$54,443
Hannah-Kayes, C	Community Mental Health Worker	$50,228
Hanson, T	Nurse IV	$55,833
Harvey, M	Registered Nurse	$57,073
Hayward, L	Nurse IV	$61,803
Hellebakken, G	Registered Nurse	$52,667
Henry, D	Program Manager	$66,671
Hextall, E	Program Educator	$61,782
Hiebert, B	Registered Nurse	$54,202
Hinchliffe, D	Charge Technologist	$59,510
Ho, K	Psychiatrist	$82,320
Hofer, K	Staff Pharmacist	$83,179
Hogg Basaraba, C	Community Mental Health Worker	$52,103
Holmes, A	Director Materiel Management	$66,612
Honeyman, E	Community Mental Health Worker	$52,100
Hooke, E	Community Mental Health Worker	$52,100
Horkey, P	Coordinator Residential Services	$78,509
Horvath, I	Psychologist	$54,514
Hubbard, C	Registered Nurse	$61,355
Hubbard, J	Clinical Resource Nurse	$59,102
Hume, M	Registered Nurse	$53,964

Brandon Regional Health Authority
Statement of Public Sector Compensation Disclosure
For the Year Ended December 31, 2002

Compensation paid to the following employees includes all salaries and allowances, overtime payments, retirement or severance payments, lump sum payments, vacation pay-outs, taxable benefits and bursaries.

Name	Position	Compensation
Hutton, C	Charge Technologist	$55,404
Ibay Yasay, N	Occupational Therapist	$52,622
Isaac, D	Community Mental Health Worker	$52,100
Jack, J	Coordinator Projects	$85,221
Jentsch, D	Medical Electronics Technologists	$51,317
Jersak, R	Physiotherapist	$51,459
Jesseau, A	Registered Nurse	$53,295
Johnson, S	Program Manager	$66,671
Johnston, B	Registered Nurse	$52,315
Karnes, E	Registered Nurse	$50,354
Kawa, L	Clinical Facilitator	$56,196
Kearley, B	Program Educator	$62,514
Kennedy, K	Psychologist	$54,443
Kennedy, S	Nurse IV	$61,582
Kennedy, W	Engineer II	$53,362
Khalema, E	Registered Psychiatric Nurse	$52,177
Kiazyk, M	Clinical Resource Nurse	$54,327
King, C	Community Mental Health Worker	$52,100
Kirk, B	Clinical Resource Nurse	$60,263
Kirk, L	Registered Psychiatric Nurse	$53,939
Kirkham, H	Coordinator Mental Health	$78,807
Klassen, J	Nurse IV	$52,195
Klassen, T	Community Mental Health Worker	$52,113
Kokorudz, S	Director Pharmacy	$107,288
Koritar, T	Technical Coordinator	$65,008
Koroscil, L	Staff Respiratory Therapist	$60,097
Kostecki, I	Registered Nurse	$54,291
Kotowsky, D	Manager Audiology	$65,779
Kowal,D	Charge Technologist	$53,463
Kozak, J	Registered Nurse	$71,894
Krasicki, A	Community Mental Health Worker	$52,100
Kroeker, M	Registered Nurse	$53,782
Ksiazek, B	Health Records Technician	$53,870
Kulbisky, G	Director Capital Planning	$82,819
Lacey-Avon, P	Nurse IV	$56,022
Lam, B	Nurse Educator	$63,049
Lamont, J	Regional Pharmacy Manager	$89,686
Lamport, C	Registered Nurse	$51,808
Lane, G	Charge Technologist	$59,846
Langston, B	Director Human Resources	$80,131
Langston, J	Registered Nurse	$72,027
Lawson, G	Staff Pharmacist	$85,871
Lee, J	Registered Nurse	$94,601
Legassie, V	Social Worker	$50,294
Lennon, Y	Coordinator Acute Care	$78,660
Levenick, L	Occupational Therapist	$50,388
Lewis, J	Senior Technologist	$50,944
Lidster, J	Registered Nurse	$51,824

Brandon Regional Health Authority
Statement of Public Sector Compensation Disclosure
For the Year Ended December 31, 2002

Compensation paid to the following employees includes all salaries and allowances, overtime payments, retirement or severance payments, lump sum payments, vacation pay-outs, taxable benefits and bursaries.

Name	Position	Compensation
Lindsey, D	Registered Nurse	$53,359
Lint, D	Psychiatrist	$93,556
Lipscomb, D	Registered Nurse	$57,522
Liu, S	Nurse IV	$59,639
Loe, J	Program Manager	$63,744
Loewen, W	Physiotherapist	$51,561
Luer, A	Pathologist	$94,572
Lumsden, T	Respiratory Therapist	$66,111
MacDowall, J	Residential Care Manager	$62,710
MacKenzie-Grube, C	Physiotherapist	$51,502
Mann, R	Charge Technologist	$56,500
Mansfield, D	Charge Technologist	$57,944
Manson McLeod, C	Clinical Redevelopment Coordinator	$80,051
Marlow, S	Occupational Therapist	$51,943
Marshall, K	Registered Psychiatric Nurse	$52,472
Martens, C	Nurse IV	$52,229
Martens, R	Community Mental Health Worker	$52,302
Martin, K	Registered Nurse	$55,605
Martin, L	Registered Nurse	$66,388
Martinook, K	Manager Facility Engineering Services	$64,783
Marvin, J	Clinical Coordinator	$63,356
May, A	Senior Technologist	$58,563
McCaig, C	Registered Nurse	$53,258
McCann, P	Occupational Health Nurse	$61,338
McConkey, M	Community Mental Health Worker	$52,100
McDonald, K	Registered Psychiatric Nurse	$58,999
McDonald, R	Nurse IV	$55,543
McDuffe, B	Nursing Manager	$52,807
McGorman, F	Supervisor Human Resources	$66,109
McGregor, D	Nurse Educator	$57,435
McIntosh, G	Vice President Support Services	$106,710
McKenzie, D	Registered Psychiatric Nurse	$50,906
McKinnon, L	Registered Nurse	$66,287
McLeod, E	Community Mental Health Worker	$52,101
McLeod, G	Registered Psychiatric Nurse	$53,701
McManes, V	Registered Psychiatric Nurse	$53,189
McNamee, G	Manager Medical Electronics	$59,563
Melinchuk, M	Registered Nurse	$53,960
Merino, J	Senior Technologist	$66,489
Mikityn, B	Medical Sonographer	$64,261
Miles, B	Engineer II	$51,498
Miller, G	Utilization Coordinator	$62,582
Minary, A	Registered Psychiatric Nurse	$54,451
Mirkovic, A	Senior Technologist	$51,327
Mitchell, G	Registered Psychiatric Nurse	$53,014
Mitchell, J	Registered Psychiatric Nurse	$53,547
Mitchell, S	Manager Information Services - Imaging	$55,100
Monk, B	Registered Nurse	$52,669

Brandon Regional Health Authority
Statement of Public Sector Compensation Disclosure
For the Year Ended December 31, 2002

Compensation paid to the following employees includes all salaries and allowances, overtime payments, retirement or severance payments, lump sum payments, vacation pay-outs, taxable benefits and bursaries.

Name	Position	Compensation
More, B	Nurse IV	$56,552
Moreno Merlo, F	Pathologist	$131,839
Morgan, C	Program Manager	$67,823
Morris, E	Community Mental Health Worker	$52,201
Morris, T	Community Mental Health Worker	$52,100
Morris, T	Registered Nurse	$50,468
Mosson, E	Registered Nurse	$54,971
Mott, L	Manager General Imaging/Mammography	$55,100
Murdock, A	Registered Nurse	$61,673
Murphy, T	Registered Nurse	$50,829
Myers, M	Senior Technologist	$57,576
Narduzzi, K	Psychologist	$62,503
Neal, G	Supervisor Facility Engineering Services	$60,993
Neff, F	Charge Technologist	$54,068
Nevins, L	Community Mental Health Worker	$52,100
Newitt, J	Nurse IV	$55,156
Nieradka, C	Clinical Resource Nurse	$51,137
O'Driscoll, L	Program Educator	$54,024
Olson, C	Vice President/CEO	$106,710
Olyamk, F	Registered Nurse	$52,073
Olyarnyk, R	General Duty Technologist	$50,537
Orr, M	Occupational Therapist	$51,734
Pachal, M	Nurse IV	$61,991
Paddock, J	Registered Nurse	$53,964
Pang, J	Senior Technologist	$50,383
Parkinson, M	Registered Nurse	$53,941
Parkolub, L	Registered Nurse	$57,799
Pascal, J	Registered Nurse	$53,989
Pattle, J	Program Manager	$56,236
Perley, S	Registered Nurse	$55,655
Perron, K	Registered Nurse	$70,240
Perzan, R	Psychologist	$54,443
Phillips, G	Coordinator Planning	$60,289
Piche, R	Registered Nurse	$52,273
Pohl, K	Senior Technologist	$50,686
Pohl, R	Director Management Information Technology	$77,018
Poole, D	Program Manager	$73,888
Porter, M	Registered Nurse	$54,320
Prayag, R	Practice Guidelines Facilitator	$89,823
Price, A	Community Mental Health Worker	$52,923
Rae, J	Registered Nurse	$58,721
Ramsay, M	Coordinator Diagnostic Services	$75,959
Randall, K	Registered Psychiatric Nurse	$56,340
Redman, L	Bio-Chemist	$89,236
Rehirchuk, R	General Duty Technologist	$50,010
Reid, C	Human Resource Officer	$52,319
Reilly, I	Program Manager	$69,804
Reimer, W	Engineer II	$53,563

Brandon Regional Health Authority
Statement of Public Sector Compensation Disclosure
For the Year Ended December 31, 2002

Compensation paid to the following employees includes all salaries and allowances, overtime payments, retirement or severance payments, lump sum payments, vacation pay-outs, taxable benefits and bursaries.

Name	Position	Compensation
Rigaux, D	Infection Control Nurse	$51,747
Riley, L	Registered Nurse	$53,532
Robar, L	Nurse IV	$59,541
Roberts, J	Senior Technologist	$67,016
Roberts, S	Program Manager	$66,799
Robertson, S	Registered Nurse	$59,419
Robinson, B	Staff Pharmacist	$54,633
Rocan, M	Medical Sonographer	$64,989
Rodrigue, L	Nurse IV	$53,774
Rouire, C	Medical Electronics Technologists	$58,520
Rusinowicz, M	Charge Technologist	$52,902
Russell, J	Nurse IV	$58,956
Rutherford, L	Staff Pharmacist	$75,303
Ryan, H	Registered Nurse	$50,642
Ryan, R	Manager Respiratory Therapy/ Cardiac Diagnostics	$61,980
Sali, C	Information Systems Engineer	$64,504
Sawchuk, J	Information Systems Engineer	$61,720
Sawers, A	Midwife	$66,556
Schettler, J	Registered Nurse	$52,441
Schoonbaert, B	Vice President Finance and Information Services	$106,700
Scott, B	Registered Psychiatric Nurse	$51,790
Selinger, N	Registered Nurse	$53,118
Shepherd, L	Community Mental Health Worker	$52,100
Sherb, J	Registered Psychiatric Nurse	$76,504
Shewchuk, A	Residential Care Manager	$61,884
Shurvell. M	Registered Nurse	$51,310
Sileikiene, D	Pathologist	$53,325
Simpson, C	Registered Nurse	$58,993
Sinclair, J	Clinical Facilitator	$68,351
Sivasankar, S**	ICU Physician	$57,991
Skinner, J	Nurse IV	$58,014
Smit, G	Registered Psychiatric Nurse	$53,420
Smith, C	Registered Nurse	$51,475
Smith, L	Registered Nurse	$65,947
Smith, R	Manager Westman Laboratory	$72,864
Smith, W	Registered Nurse	$53,061
Speers, G	Senior Technologist	$53,446
Stan, R	Registered Nurse	$53,808
Stewart, K	Registered Nurse	$51,872
Stiles, L	Program Manager	$66,671
Strahl, L	Registered Nurse	$55,133
Strath, D	Registered Nurse	$50,660
Strock, D	Nursing Resource Coordinator	$53,838
Struthers, L	Manager CSR	$59,535
Sumner, L	Staff Respiratory Therapist	$60,430
Svistovski, F	Registered Nurse	$52,679
Swojanovski, M	Coordinator Residential Services	$78,530
Tait, M	Registered Nurse	$55,465

Brandon Regional Health Authority
Statement of Public Sector Compensation Disclosure
For the Year Ended December 31, 2002

Compensation paid to the following employees includes all salaries and allowances, overtime payments, retirement or severance payments, lump sum payments, vacation pay-outs, taxable benefits and bursaries.

Name	Position	Compensation
Taylor, M	Clinical Director - Westman Laboratory	$211,164
Taylor, S	Physiotherapist	$53,725
Teney, N	Residential Care Manager	$62,231
Thompson, E	Teacher Hearing Impaired	$52,243
Thompson, H	Registered Nurse	$52,561
Thomson, D	Clinical Resource Nurse	$53,654
Thornton, L	Community Mental Health Worker	$52,121
Thorpe, D	Registered Nurse	$53,231
Tillapaugh, S	Registered Nurse	$54,577
Todd, C	Registered Nurse	$52,204
Todd, N	Registered Nurse	$57,732
Toth, B	Staff Pharmacist	$76,007
Townsend, D	Registered Nurse	$53,570
Traill, K	Community Mental Health Worker	$50,286
Treloar, L	Manager Ultrasound	$57,029
Troop, J	Program Manager	$66,671
Tsagarakis, C	Psychologist	$62,224
Tschetter, K	Nurse IV	$51,144
Turnbull, M	Executive Assistant	$51,336
Turner, J	Program Educator	$59,460
Ursel, S	Community Mental Health Worker	$52,100
Verinder, R	Registered Psychiatric Nurse	$55,135
Vinck, S	Registered Nurse	$52,057
Vipulananthan, M	Psychiatrist	$97,638
Vipulananthan, V	Psychiatrist	$105,337
Vodon, R	Registered Psychiatric Nurse	$53,106
Vogt, C	Residential Care Manager	$56,610
Waldie, B	Registered Psychiatric Nurse	$54,422
Warburton, S	Registered Psychiatric Nurse	$51,968
Ward, K	Registered Nurse	$56,942
Ward, T	Regional Director - PreHospital & Emergency Service	$60,608
Warren, D	Registered Nurse	$56,387
Wasem, W	Director Nutrition Services	$66,612
Webber, S	Clinical Coordinator Occupational Therapy	$55,774
Weinand, J	Language Specialist	$54,443
Weir, D	E.E.G. Technologist	$50,114
Wells, D	Engineer II	$50,927
Wharf, P	Registered Nurse	$52,559
Wheaton, P	Registered Nurse	$78,847
White, R	Resource Developer	$53,164
White, V	Program Educator	$53,772
White-Mooney, L	Community Mental Health Worker	$52,100
Wiebe, L	Nurse IV	$60,869
Wiebe, S	Registered Nurse	$52,180
Wikstrom, D	Community Mental Health Worker	$52,100
Wilcox-McKay, J	Comptroller/Corporate Liason	$82,323
Wilderspin, J	Chaplain	$52,075
Wilkie, D	Registered Nurse	$52,927

Brandon Regional Health Authority
Statement of Public Sector Compensation Disclosure
For the Year Ended December 31, 2002

Compensation paid to the following employees includes all salaries and allowances, overtime payments, retirement or severance payments, lump sum payments, vacation pay-outs, taxable benefits and bursaries.

Name	Position	Compensation
Willard, M	Pathologist	$78,383
Willson, P	Registered Nurse	$54,167
Wilson, C	Chief of Staff	$163,163
Winger, R	Charge Technologist	$54,243
Winter, D	Nurse IV	$56,721
Worth, M	Registered Nurse	$63,879
Wotton, V	Registered Nurse	$56,304
Wozney, C	Registered Nurse	$54,310
Wray, J	Nurse IV	$52,394
Wright, J	Coordinator Public Health	$75,531
Yam, C	Psychiatrist	$61,106
Yonda, K	Community Mental Health Worker	$54,603
Yorke, M	Microbiologist	$67,714
Young, S	Health Promotion/Education Specialist	$52,100
Yuen, J	Registered Nurse	$55,624
Zhang, D	Pathologist	$196,062
Zihrul, R	Systems Administrator Diagnostics	$55,093
Zoner, G	Director Property Management	$68,869

Note: There were no directors receiving compensation in excess of $50,000 individually. Compensation paid to directors amounted to $51,500 in aggregate.

** Deceased

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AUDITORS' REPORT

To the Board of Directors of
Brandon Regional Health Authority

We have audited the consolidated statement of financial position of Brandon Regional Health Authority as at March 31, 2003 and the consolidated statements of operations, changes in net assets and cash flows for the year then ended. These financial statements are the responsibility of the Authority's management. Our responsibility is to express an opinion on these consolidated financial statements based on our audit.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these consolidated financial statements present fairly, in all material respects, the financial position of Brandon Regional Health Authority as at March 31, 2003 and the results of its operations and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

Deloitte & Touche LLP.

Chartered Accountants

Winnipeg, Manitoba
June 25, 2003

Brandon Regional Health Authority
Consolidated Statement of Financial Position

March 31		2003	2002 (Restated Note 15)
ASSETS			
CURRENT			
	Cash	$ 1,190,375	$ 2,723,691
	Accounts receivable (Note 3)	4,812,780	2,366,781
	Inventories	1,338,691	1,346,473
	Prepaid expenses	770,286	1,132,806
	Due From Manitoba Health - Vacation	5,785,536	5,204,983
		13,897,668	**12,774,734**
DUE FROM MANITOBA HEALTH - Pre-retirement		7,507,463	6,892,515
INVESTMENTS (Note 4)		3,829,428	3,496,361
CAPITAL ASSETS (Note 5)		79,812,981	54,990,335
OTHER ASSETS		5,674,396	5,201,019
		$ 110,721,936	**$ 83,354,964**
LIABILITIES			
CURRENT			
	Accounts payable and accrued liabilities	$ 9,867,337	$ 8,473,300
	Bank advances	11,398,561	4,984,343
	Employee Future Benefits - Vacation	5,785,536	5,204,983
	Current portion of obligation under capital lease (Note 7)	330,522	-
	Current portion of long term debt (Note 6)	356,338	350,058
		27,738,294	**19,012,684**
ACCRUED EMPLOYEE FUTURE BENEFITS - Pre-retirement		7,507,463	6,892,515
OBLIGATION UNDER CAPITAL LEASE (Note 7)		1,311,609	-
LONG TERM DEBT (Note 6)		11,567,629	11,691,359
DEFERRED CONTRIBUTIONS (Note 8)			
	Expenses of future periods	974,004	974,124
	Grants from the Province of Manitoba	30,591,937	16,756,944
	Capital assets	23,496,536	20,254,768
		103,187,472	**75,582,394**
NET ASSETS			
	Invested in capital assets (Note 9)	4,517,046	5,727,541
	Internally restricted (Note 10)	3,456,596	3,045,145
	Externally restricted (Note 10)	26,665	25,440
	Unrestricted	(465,843)	(1,025,556)
		7,534,464	**7,772,570**
		$ 110,721,936	**$ 83,354,964**

Brandon Regional Health Authority
Consolidated Statement of Operations

For the year ended March 31	2003	2002 (Restated Note 15)
REVENUE		
Manitoba Health operating income		
Income as per Funding Document (excluding funding related to Capital)	$ 117,280,157	$ 104,992,389
One Time Funding	1,700,000	-
Retroactive Salary Payments	1,105,713	517,612
Recovery of Non Global Items	510,493	538,351
Deferral of Manitoba Health Income	(53,270)	(8,500)
Other Manitoba Health Income	3,537,165	2,361,842
Total Manitoba Health Funding (Note 11)	124,080,258	108,401,694
Non-insured income	8,179,463	5,891,393
Other Income	2,507,314	2,223,980
Amortization of deferred contributions	5,502,481	4,257,979
Amortization of deferred contributions - Non Devolved Facilities	643,360	608,603
Ancillary revenue	2,927,405	2,874,386
	143,840,281	124,258,035
EXPENSES		
Acute Care services	77,565,711	72,538,483
Long Term Care Services	27,148,577	17,876,149
Medical Remuneration - All Programs	7,607,748	6,825,896
Community Services Administration	739,746	716,605
Community Based Mental Health Services	8,509,084	8,246,439
Community Based Home Care Services	4,506,386	4,085,101
Community Based Health Services	3,057,403	2,820,969
Land Ambulance	207,593	201,912
RHA Administration Costs	2,287,701	2,090,837
Amortization of capital assets	6,087,680	5,187,969
Capital payments - Non Devolved Facilities	643,360	608,603
Interest on long term debt	2,498,044	2,395,608
Interest on Capital Lease	40,569	-
Other operating expenses	655,657	337,700
Ancillary expenses	2,523,128	2,419,224
	144,078,387	126,351,495
Shortfall of revenue over expenses for the year	$ (238,106)	$ (2,093,460)
ALLOCATION OF SHORTFALL FROM OPERATIONS:		
Investment in Capital Assets - Manitoba Health Activities	$ (470,393)	$ (547,433)
Unrestricted - Manitoba Health Activities	758,626	(1,183,782)
Investment in Capital Assets - Non Manitoba Health Activities	(998,321)	(920,926)
Internally Restricted - Non Manitoba Health Activities	470,757	533,241
Externally Restricted	1,225	25,440
	$ (238,106)	$ (2,093,460)

Brandon Regional Health Authority
Consolidated Statement of Changes in Net Assets

For the year ended March 31, 2003

	Invested in Capital Assets	Internally Restricted	Externally Restricted	Unrestricted	2003 Total	2002 Total
BALANCE, beginning of year	$ 5,727,541	$ 3,045,145	$ 25,440	$ (1,025,556)	$ 7,772,570	$ 9,866,030
(Shortfall) Excess of revenue over expenses	(1,468,714)	470,757	1,225	758,626	(238,106)	(2,093,460)
Net change in investment in capital assets	258,219	(59,306)	-	(198,913)	-	-
BALANCE, end of year	**$ 4,517,046**	**$ 3,456,596**	**$ 26,665**	**$ (465,843)**	**$ 7,534,464**	**$ 7,772,570**

Brandon Regional Health Authority
Consolidated Statement of Cash Flows

For the year ended March 31	2003	2002 (Restated Note 1)
OPERATING ACTIVITIES		
Shortfall of revenue over expenses	$ (238,106)	$ (2,093,460)
Items not affecting cash		
Amortization of capital assets	6,087,680	5,187,969
Amortization of deferred contributions related to expenses of future periods	(883,524)	(538,370)
Amortization of deferred contributions related to capital assets	(4,618,957)	(3,719,609)
Changes in non-cash operating working capital items	(681,660)	5,827,385
	(334,567)	4,663,915
FINANCING ACTIVITIES		
Increase in deferred contributions related to expenses of future periods	883,404	776,083
Increase in deferred contributions related to capital assets	7,860,725	4,236,249
Increase in deferred contributions related to grants from the Province of Manitoba	15,500,000	-
Reduction in deferred contributions related to grants from the Province of Manitoba	(1,665,007)	(1,583,333)
Increase in bank advances	22,772,672	2,256,801
Repayment of bank advances	(16,358,454)	(280,721)
Repayment of long term debt	(117,450)	(110,397)
Repayment of obligation under capital lease	(439,885)	-
	28,436,005	5,294,682
INVESTING ACTIVITIES		
Purchase of capital assets	(28,828,310)	(6,501,326)
Increase in other assets	(473,377)	(491,041)
Increase in investments	(333,067)	(282,341)
	(29,634,754)	(7,274,708)
(DECREASE) INCREASE IN CASH	**(1,533,316)**	**2,683,889**
CASH, BEGINNING OF YEAR	**2,723,691**	**39,802**
CASH, END OF YEAR	**$ 1,190,375**	**$ 2,723,691**

31 March 2003

1 PURPOSE OF THE ORGANIZATION

The Brandon Regional Health Authority ("Authority") was incorporated under the laws of Manitoba on January 6, 1997. The Authority commenced activity on April 1, 1998. The Authority is principally involved in providing health care services to the community of Brandon and surrounding regions. The Authority is a registered charity under the Income Tax Act and accordingly is exempt from income taxes, provided certain requirements of the Income Tax Act are met.

2 SIGNIFICANT ACCOUNTING POLICIES

The financial statements have been prepared by management in accordance with Canadian generally accepted accounting principles and include the following significant accounting policies:

a) ***Basis of Reporting***

The Authority provides health care services through devolved and contract facilities. All significant inter-divisional transactions of these organizations have been eliminated.

The assets, liabilities, and operations of the following devolved organizations have been included in these financial statements:

Brandon Regional Health Centre
Child and Adolescent Treatment Centre
Community and Home Care Health Services
Community Mental Health Services
Fairview Home
Rideau Park Personal Care Home
Westman Laundry

The health care services provided by the contract facilities are delivered under the control of the Authority as the major funder. The financial position and results of operations of these related organizations (The Salvation Army Dinsdale Personal Care Home and Westman Regional Laboratory Services Inc.) have not been consolidated. Instead a summary of their financial information has been included in these notes (Note 14).

b) ***Revenue recognition***

The Authority follows the deferral method of accounting for contributions which include donations and government grants.

2 SIGNIFICANT ACCOUNTING POLICIES (Continued)

b) ***Revenue recognition (Continued)***

Under the Health Insurance Act and regulations thereto, the Authority is funded primarily by the Province of Manitoba in accordance with budget arrangements established by Manitoba Health. Operating grants are recorded as revenue in the period to which they relate. Grants approved but not received at the end of an accounting period are accrued. Where a portion of a grant relates to a future period, it is deferred and recognized in that subsequent period. These financial statements reflect agreed arrangements approved by Manitoba Health with respect to the year ended March 31, 2003.

Unrestricted contributions are recognized as revenue when received, or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Externally restricted contributions other than endowment contributions are recognized as revenue in the year in which the related expenses are recognized. Contributions restricted for the purchase of capital assets are deferred and amortized into revenue on a straight line basis, at a rate corresponding with the amortization rate for the related capital assets.

Restricted investment income is recognized as revenue in the year in which the related expenses are recognized. Unrestricted investment income is recognized as revenue when earned.

Revenue from preferred accommodation, and marketed services is recognized when the goods are sold or the service is provided.

c) ***Contributed services***

A substantial number of volunteers contribute a significant amount of their time each year. Because of the difficulty of determining the fair value, contributed services are not recognized in the financial statements.

d) ***Inventories***

Inventories are valued at average cost, except pharmacy inventory which is valued at the actual cost using the first in, first out method.

e) ***Investments***

Investments are recorded at cost. If the market value of investments becomes lower than cost and this decline in value is considered to be other than temporary, the investments are written down to market value.

2 SIGNIFICANT ACCOUNTING POLICIES (Continued)

f) *Capital assets*

Purchased capital assets are recorded at cost. Contributed capital assets are recorded at fair value at the date of contribution. Repairs and maintenance costs are charged to expense. Betterments which extend the estimated useful life of an asset are capitalized. When a capital asset no longer contributes to the Authority's ability to provide services, its carrying amount is written down to its residual value.

Capital assets, excluding vehicles are amortized on a straight-line basis using the following annual rates:

Land & parking lots	10%
Buildings	2.5% - 6.67%
Building service equipment/equipment	5% - 20%

Vehicles are amortized an a declining balance basis using 30% as the annual rate and are included in building service equipment/equipment.

g) *Compensated absences*

Compensation expense is accrued for all employees as entitlement to these payments is earned, in accordance with the Authority's benefit plans for vacation.

h) *Pre-Retirement entitlement obligation*

The Authority's contractual commitment, based on an actuarial valuation, for the pre-retirement entitlement for members of the Health Employee Pension Plan is to pay out four days of salary for each year of service upon retirement if the employee complies with one of the following conditions:

- have ten years service and have reached the age of 55 or
- qualify for the "eighty" rule which is calculated by adding the number of years service to the age of the employee
- retire at or after age 65
- terminate employment at any time due to permanent disability

The Authority's contractual commitment, based on an actuarial valuation, for the pre-retirement entitlement for members of the Civil Service Superannuation Plan is to pay out, at retirement to employees who have reached the age of 55 and have nine or more years of service, the following severance pay:

- one week of severance pay for each year of service up to 15 years of service
- two weeks of additional severance pay for each increment of five years service past the 15 years of service up to 35 years of service

The Authority has recorded an accrual based on an actuarial valuation that includes employees who qualify at the year-end balance sheet date and an estimate for the remainder of the employees who have not yet met the criteria above. Funding for the retirement entitlement is recoverable from Manitoba Health in the year of payment.

The significant actuarial assumptions adopted in measuring the Authority's accrued retirement entitlements include mortality and withdrawal rates, a discount rate of 6.5% and a rate of salary increase of 4.0% plus age related merit/promotion scale with nil for disability.

2 SIGNIFICANT ACCOUNTING POLICIES (Continued)

i) *Due From Manitoba Health - Employee Future Benefits*

Funding for vacation entitlements and pre-retirement entitlement obligations is provided by Manitoba Health as part of its regular budget in the period in which expenditures are made. Accordingly, the cost of the estimated accrued vacation pay and pre-retirement entitlement obligations at year end is recorded on the statement of financial position as a receivable from Manitoba Health.

j) *Due to/from Manitoba Health*

In Globe Funding

In Globe funding is funding approved by Manitoba Health for Regional Health Authority programs unless otherwise specified as Out of Globe funding. This includes volume changes and price increases for the five service categories of Acute Care, Long Term Care, Community and Mental Health, Home Care and Emergency Response and Transport. All additional costs in these five service categories must be absorbed within the global funding provided.

Any operating surplus greater than 2% of budget related to In Globe funding arrangements is recorded on the statement of financial position as a payable to Manitoba Health until such time as Manitoba Health reviews the financial statements. At that time Manitoba Health determines what portion of the approved surplus may be retained by the Authority, or repaid to Manitoba Health.

Out of Globe Funding

Out of Globe funding is funding approved by Manitoba Health for specific programs.

Any operating surplus related to Out of Globe funding arrangements is recorded on the statement of financial position as a payable to Manitoba Health until such time as Manitoba Health reviews the financial statements. At that time Manitoba Health determines what portion of the approved surplus may be retained by the Authority, or repaid by Manitoba Health.

Conversely, any operating deficit related to Out of Globe funding arrangements is recorded on the statement of financial position as a receivable from Manitoba Health until such time as Manitoba Health reviews the financial statements. At that time, Manitoba Health determines their final funding approvals which indicate the portion of the deficit that will be paid to the Authority. Any unapproved costs not paid by Manitoba Health are absorbed by the Authority.

k) *Financial Instruments*

Credit Risk

Credit risk arises from the potential that a counter party will fail to perform its obligations. The Authority's accounts receivable are comprised mostly of amounts due from the government of Manitoba which minimizes credit risk.

Interest Rate Risk

Interest rate risk is the risk arising from fluctuations in short term interest rates and the volatility of those rates. The Authority mitigates this risk by retaining the option to convert all floating rate borrowings to fixed rate borrowings.

2 SIGNIFICANT ACCOUNTING POLICIES (Continued)

k) *Financial Instruments (Continued)*
Fair Value

The carrying amount of short term financial assets and liabilities are a reasonable estimate of the fair values because of the short maturity of those instruments. Short term financial assets are comprised of cash, accounts receivable and the current portion of the Due from Manitoba Health - Vacation.
Short term financial liabilities are comprised of accounts payable and accrued liabilities, bank advances and the current portion of Employee Future Benefits - Vacation.

The fair value of the long term receivable Due from Manitoba Health - Pre-retirement and the fair value of the long term obligation Accrued Employee Future Benefits - Pre-retirement could not be determined because there is no set date for repayment.

3 ACCOUNTS RECEIVABLE

	2003	2002
Manitoba Health		
Retroactive Salary Increases	$ 953,686	$ -
Other Operations	557,493	(212,570)
Approved Capital Borrowing	(111,673)	790,921
Out of Globe - 2001/02	27,102	199,842
Out of Globe - 2002/03	(94,389)	-
	1,332,219	778,193
Patients	141,914	304,307
Government of Canada - Goods and Services Tax	398,965	267,229
BRHC Foundation , BGH Auxiliary and Westman Laboratory	1,956,412	366,097
Sundry	1,007,391	750,232
	4,836,901	2,466,058
Less allowance for doubtful accounts	(24,121)	(99,277)
	$ 4,812,780	**$ 2,366,781**

4 INVESTMENTS

	2003	
	Cost	Fair Value
Government of Canada Bonds	$ 1,642,622	$ 1,666,518
Other Bonds	2,159,297	2,235,584
GICs	25,000	25,440
Equities	2,509	2,509
	$ 3,829,428	**$ 3,930,051**

	2002	
	Cost	Fair Value
Government of Canada Bonds	$ 1,573,734	$ 1,583,923
Other Bonds	1,202,364	1,213,686
GICs	719,583	719,583
Equities	680	680
	$ 3,496,361	**$ 3,517,872**

The fair value of the investments is based on the year end quoted market bid price.

5 CAPITAL ASSETS

	2003		
	Cost	Accumulated Amortization	Net Book Value
Land & parking lots	$ 3,309,343	$ 722,142	$ 2,587,201
Buildings	55,978,076	19,660,225	36,317,851
Building service equipment/equipment	52,372,805	36,741,734	15,631,071
Work in Progress	25,276,858	-	25,276,858
	$ 136,937,082	**$ 57,124,101**	**$ 79,812,981**

	2002		
	Cost	Accumulated Amortization	Net Book Value
Land & parking lots	$ 3,309,343	$ 637,333	$ 2,672,010
Buildings	55,906,871	18,252,801	37,654,070
Building service equipment/equipment	43,184,801	32,146,287	11,038,514
Work in Progress	3,625,741	-	3,625,741
	$ 106,026,756	**$ 51,036,421**	**$ 54,990,335**

During the year, the Authority purchased capital assets with an aggregate cost of $ 30,910,326 of which $2,082,016 were acquired by means of a capital lease. Cash payments of $28,828,310 were made to purchase capital assets.

6 LOANS AND MORTGAGES PAYABLE

	2003	2002
School of Nursing Building 5.75% mortgage, repayable $27,241 semi-annually, including interest, maturing 2019. The mortgage is secured by land and buildings.	$ 564,971	$ 586,053
Fairview Home 6% mortgage, repayable $3,907 monthly, including interest, maturing 2018. The mortgage is secured by land and buildings.	472,345	490,425
Fairview Home 7 1/2% mortgage, repayable $2,778 monthly, including interest, maturing 2023. The mortgage is secured by land and buildings.	347,584	354,755
Fairview Home 10 1/8%, sinking fund debenture, repayable $97,318 monthly, including interest, maturing 2008. The indenture documentation assigns the subsidies provided by Manitoba Health for payment of the debenture.	9,250,000	9,250,000

31 March 2003

6 LOANS AND MORTGAGES PAYABLE (Continued)

	2003	2002
City of Brandon 6.5% loan, repayable $159,529 annually, including interest, maturing 2015.	1,289,067	1,360,184
	11,923,967	12,041,417
Less current portion	(356,338)	(350,058)
	$ 11,567,629	$ 11,691,359

The fair value of the Authority's long term debt is $6,459,375 as at March 31, 2003 (2002 - $7,336,446) calculated using discounted cash flow analysis based on incremental borrowing rates currently available for similar terms and maturities.

Principal payments due in the next five years are as follows:		
	2004	$ 356,338
	2005	364,331
	2006	372,835
	2007	381,885
	2008	9,410,266

7 OBLIGATION UNDER CAPITAL LEASE

The Authority has obligations under capital lease for equipment secured by the equipment. The minimum capital lease payment based on the lease is as follows:

	2003	2002
2004	$ 330,522	$ -
2005	349,705	-
2006	370,001	-
2007	391,475	-
2008	200,428	-
	1,642,131	-
Less: Current Portion	(330,522)	-
	$ 1,311,609	$ -

Interest costs over the life of the lease are $224,937 which are calculated at 5.722%.

8 DEFERRED CONTRIBUTIONS

a) *Expenses of future periods*

Deferred contributions related to expenses of future periods represent unspent externally restricted grants for equipment and construction projects.

	2003	2002
Balance, beginning of year	$ 974,124	$ 736,411
Add amount received	983,304	776,083
Less amount transferred to deferred contributions related to capital assets	(99,900)	-
Less amount amortized to revenue in the year	(883,524)	(538,370)
Balance, end of year	**$ 974,004**	**$ 974,124**

b) *Grants from the Province of Manitoba*

The Authority obtained financing from the Province of Manitoba in the form of promissory notes. The Province, as the lender, will also provide future funding to repay those promissory notes. Accordingly, for accounting purposes this form of financing and funding is considered to be a grant received from the Province and is accounted for as a deferred contribution.

	2003	2002
Balance, beginning of year	$ 16,756,944	$ 18,340,277
Add new financing	15,500,000	-
Less principal payments transferred to capital assets	(1,665,007)	(1,583,333)
	$ 30,591,937	$ 16,756,944
Province of Manitoba #1		
Promissory note, repayable $131,944 monthly, plus interest at 7%, maturing 2012.	$ 15,173,611	$ 16,756,944
Province of Manitoba #2		
Promissory note, repayable $81,578 monthly, plus interest at bankers acceptance plus .25%, maturing 2019.	15,418,326	-
	$ 30,591,937	$ 16,756,944

The fair value of the Authority's loans payable to the province is $28,072,605 as at March 31, 2003 (2002 - $28,287,851) calculated using discounted cash flow analysis based on incremental borrowing rates currently available for similar terms and maturities.

8 DEFERRED CONTRIBUTIONS (Continued)

c) *Capital assets*

Deferred capital contributions related to capital assets represent the unamortized amount and unspent amount of grants and donations received for the purchase of capital assets. The amortization of capital contributions is recorded as revenue in the statement of operations.

	2003	2002
Balance, beginning of year	$ 20,254,768	$ 19,738,128
Additional contributions received	7,760,825	4,236,249
Add amount transferred from expenses of future periods	99,900	-
Less amounts amortized to revenue in the year	(4,618,957)	(3,719,609)
Balance, end of year	$ 23,496,536	$ 20,254,768

The balance of unamortized capital contributions related to capital assets consists of the following:

	2003	2002
Unamortized capital contributions used to purchase assets	$ 24,192,752	$ 20,293,645
(Overspent)/unspent contributions	(696,216)	(38,877)
	$ 23,496,536	$ 20,254,768

9 INVESTMENT IN CAPITAL ASSETS

Investment in capital assets is calculated as follows:

	2003	2002
Capital assets	$ 79,812,981	$ 54,990,335
Funds held by Manitoba Health	5,674,396	5,201,019
Amounts financed by:		
Deferred contributions	(24,192,752)	(20,293,645)
Deferred contributions - Loans Payable to the Province	(30,591,937)	(16,756,944)
Obligation under capital lease	(1,642,131)	-
Accounts Payable	(1,220,983)	(387,464)
Loan and mortgage payable	(23,322,528)	(17,025,760)
	$ 4,517,046	$ 5,727,541

10 RESTRICTED ASSETS

Internally Restricted

The Board of Directors has restricted net assets related to non Manitoba Health activities of $3,456,596 (2002 - $3,045,145). The revenue earned on these restricted assets is used for the operations of these non Manitoba Health activities and for possible capital asset purchases.

Externally Restricted

Net assets are restricted for scholarship purposes and are subject to externally imposed restrictions that the assets be maintained permanently. Investment income from this fund is restricted for a scholarship.

11 MANITOBA HEALTH REVENUE

	2003	2002
Allocation per Funding Document	$ 120,500,957	$ 107,735,809
Add: MAHCP Accrual	36,163	181,131
CUPE Accrual	929,716	336,481
Medical Remuneration Retroactive Payments	139,834	-
One Time Funding	1,700,000	-
Less: Deferral of Income for Grant Funded Programs	(53,270)	(8,500)
Rural pharmacy portion of Recruitment & Retention	(44,550)	-
Total Funding Approved by Manitoba Health	123,208,850	108,244,921
Add: Other Income		
Non-Global Reconciliation	510,493	538,351
Pharmacy Recruitment & Retention	252,582	-
Miscellaneous Program Income	-	33,234
Midwifery funding	244,149	173,607
Fee for Service Income	1,840,124	1,572,336
Future Employee Benefits	1,195,501	582,665
Arbitration Award - 12 Hour Shifts	49,359	-
Less: Amounts recorded in Deferred Contributions	(3,220,800)	(2,743,420)
Total Revenue from Manitoba Health	$ 124,080,258	$ 108,401,694

12 COMMITMENTS AND CONTINGENCIES

a) The Authority has entered into various operating lease commitments. The amount payable over the next five years are as follows:

2004	$	350,474
2005		368,594
2006		405,743
2007		414,845
2008		424,228

b) The Authority is subject to individual legal actions arising in the normal course of business. It is not expected that these legal actions will have a material adverse effect on the financial position of the Authority.

c) Effective January 1, 2003 the Authority joined in the Healthcare Insurance Reciprocal of Canada ("HIROC"). HIROC is a pooling of the public liability insurance risks for its members. All members of the pool pay annual premiums which are actuarialiy determined. All members are subject to reassessment for losses, if any, experienced by the pool for the years in which they were members, and these losses could be material. No reassessments have been made to March 31, 2003.

13 PENSION PLAN

The majority of the employees of the Authority are members of the Health Employees Pension Plan (HEPP), which is a multi-employer defined benefit pension plan. HEPP plan members will receive benefits based on the length of service and on the average of annualized earnings calculated on the best five of the eleven consecutive years prior to retirement, termination or death, that provide the highest earnings. The costs of the benefit plan are not allocated to the individual health entities within the related group. As a result, individual entities within the related group are not able to identify their share of the underlying assets and liabilities. Therefore, the plan is accounted for as a defined contribution plan in accordance with the requirements of the Canadian Institute of Chartered Accountants' Handbook section 3461.

Pension assets consist of investment grade securities. Market and credit risk on these securities are managed by HEPP by placing plan assets in trust and through HEPP investment policy. Pension expense is based on HEPP management's best estimates, in consultation with its actuaries, of the amount, together with the 5% basic annual earnings up to the Canada Pension Plan ceiling plus 6.6% of basic earnings in excess of the Canada Pension Plan ceiling contributed by employees, required to provide a high level of assurance that benefits will be fully represented by fund assets at retirement, as provided by HEPP. The funding objective is for employer contributions to HEPP to remain a constant percentage of employee's contributions.

Variance between actuarial funding estimates and actual expenditures may be material and any differences are generally to be funded by the participating members. The most recent actuarial valuation of the plan as at December 31, 2000, indicates the plan is fully funded. Actual contributions to HEPP made during the year by the Authority on behalf of its employees amounted to $2,437,984 (2002 - $2,188,152) and are included in statement of operations.

The remaining employees of the Authority are eligible for membership in the provincially operated Civil Service Superannuation Plan. The pension liability for Authority employees is included in the Province of Manitoba's liability for the Civil Service Superannuation Fund. Accordingly, no provision is required in the financial statements relating to the effects of participation in the pension plan by the Authority and its employees.

14 NON-DEVOLVED FACILITIES

The Authority has a contract arrangement with The Salvation Army Dinsdale Personal Care Home, which provides long term care in the community of Brandon. In addition, the organization carries out the charitable, educational, religious and other benevolent objects and purposes of the Salvation Army. The organization is a registered charity under the Income Tax Act.

The Authority also has the responsibility of providing management services to Westman Regional Laboratory Services Inc. ("Westman Lab"). Westman Lab provides laboratory services to a number of health care providers in Manitoba. The majority of Westman Lab's revenue is from Manitoba Health.

The Authority does recognize that since there is economic dependence of both Dinsdale Personal Care Home and Westman Lab on the Authority, accounting control does exist between the Authority and these organizations. In light of this, Management of the Authority has provided a financial summary of these organizations. All revenues received by the Authority on behalf of Westman Lab and Dinsdale Personal Care Home are reflected in the Authorities revenues and payments issued to these entities are recorded as expenses. In addition, the operating deficit for Dinsdale Personal Care Home has been recorded as an expense in the Authorities financial statements.

Financial statements of Dinsdale Personal Care Home and Westman Lab are available upon request.

The Salvation Army Dinsdale Personal Care Home

	2003	2002
FINANCIAL POSITION		
Total assets	$ 2,969,851	$ 3,064,113
Total liabilities	$ 2,722,568	$ 2,766,139
Total net assets	247,283	297,974
	$ 2,969,851	$ 3,064,113
RESULTS OF OPERATIONS		
Total revenues	$ 2,865,506	$ 2,754,174
Total expenses	(2,916,197)	(2,800,754)
Net operating deficit	$ (50,691)	$ (46,580)

Westman Regional Laboratory Services Inc.

	2003	2002
FINANCIAL POSITION		
Total assets	$ 3,330,056	$ 3,264,601
Total liabilities	$ 3,336,947	$ 3,271,492
Total net assets	(6,891)	(6,891)
	$ 3,330,056	$ 3,264,601

14 NON-DEVOLVED FACILITIES (Continued)

RESULTS OF OPERATIONS

Total revenues	$ 11,641,771	$ 11,057,681
Total expenses	(11,961,789)	(11,178,884)
Net operating shortfall (recoverable from Manitoba Health)	$ (320,018)	$ (121,203)

Westman Regional Laboratory Services Inc. 2002 figures were restated to record Manitoba Health Income for pre-retirement expenses. A portion of the deficit for 2002 was not covered by Manitoba Health.

15 RESTATEMENT OF PRIOR PERIODS

During the year the Authority modified their method of accounting for accrued obligations, accrued vacation obligations and accrued overtime obligations at the request of Manitoba Health. The prior period comparative numbers have been retroactively restated to account for the change. The net effect of the restatement for the year ended March 31, 2002 is to increase Manitoba Health income by $582,665 and increase the acute care services expenditures by $582,665.

A prepayment on the capital lease was amortized in the previous year. To properly reflect the amortization on the capital equipment the amortization has been restated. The net effect of the restatement for the year ended March 31, 2002 is to increase capital assets and deferred contributions by $32,745 and decrease amortization of deferred contributions and amortization of capital assets by $32,745.